

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) End Citizens United		FEC IDENTIFICATION NUMBER ▼ C C00573261	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mission Control		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 624 Hebron Ave Bldg 3 Suite 200		Amount 20011.40	
City Glastonbury	State CT	Zip Code 06033-2470	Transaction ID : VSGDK9TM6H9
Purpose of Expenditure Printing and postage (estimated)	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2016	
Name of Federal Candidate Faso, John J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Mission Control		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 624 Hebron Ave Bldg 3 Suite 200		Amount 11550.00	
City Glastonbury	State CT	Zip Code 06033-2470	Transaction ID : VSGDK9TQFE8
Purpose of Expenditure Printing and postage (estimated)	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2016	
Name of Federal Candidate MASTO, CATHERINE CORTEZ, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	31561.40
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Foucart, Brian, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 29 / 2016

Signature